

Questionnaire for the 2004-2006 Alaska HIV Prevention Plan

This questionnaire is intended to help us evaluate the 2004-2006 Alaska HIV Prevention Plan. Thank you for your time and thoughtful answers.

Is the *Plan* well organized?

What doesn't this *Plan* provide that would be useful to you?

Are there specific sections of the *Plan* that you especially liked or thought needed improvement?

How will you utilize the Plan or implement the recommendations in the Plan?

Name & Contact Information: _____

Agency: _____

Do you provide services for those populations identified in the Plan as being at risk for HIV? If yes, which populations?

If not, with what primary populations do you work?

Thank you for taking the time to fill out this evaluation form! Please return to:

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